

Hoop Star Basketball Camps

Tempe High School
1730 S. Mill Ave. Tempe

Head Girls Varsity Coach at Tempe High,
Dave Morton will be coaching the camps.

Camp will cover shooting drills, offensive
skills and player fundamentals. You are go-
ing to have a good time while learning new
skills with



Camp Fun Package!
For only \$25 you get a Water Bottle,
Sport Bag, and a Basketball ball.
Purchase at Kiwanis Recreation
Center Front Desk

June 6th-10th	M-F	1-3 pm	Grades: 4-6 (girls/boys)	Fee: \$80	KBTH-1C
June 20th-24th	M-F	1-3 pm	Grades: 6-8 (girls only)	Fee: \$80	KBTH-2C

Registration Form – Basketball Camps 2005

(One registration form per participant.)

Name: _____
Last First MI
Address: _____ City: _____ Zip: _____
Grade Entering: _____ Date of Birth: _____ Age: _____ Email: _____
Parent or Contact Name: _____ Relationship: _____
Day Phone: _____ Evening Phone: _____
Registration Code(s): _____ Date(s): _____ Amt.: \$ _____
Shirt Size (circle) Youth S M L Adult S M L XL
Check# _____ (Make check payable to City of Tempe)
Visa/Mastercard/Discover/AMEX # _____ Exp. Date: _____
Signature: _____ (to authorize charge)

In consideration of accepting this event entry, I do hereby for and on behalf of myself, my heirs, and legal representatives release and forever discharge the City of Tempe and the Kiwanis Park Recreation Center, their officers, committees, representatives and their successors of every kind, nature, and character, from any claim which I may have or hereafter acquire for any and all damages, losses, or injuries which may be suffered or sustained by me in connection with my activities during the said event and all such claims are hereby waived and released and I covenant not to sue therefore. I understand that **the City of Tempe does NOT carry accident insurance for this event** and I am aware and agree to assume all risks associated with my participation. I will additionally permit the free use of my name and picture in broadcasts, telecasts, newspapers, brochures, web sites, etc. Falsification of any information on this registration form will result in suspension from the program. If I require certain accommodations to participate, I will note them below.

SIGNATURE _____ DATE _____
(Parent or Guardian if under 18)

Kiwanis Park Recreation Center 6111 S. All America Way, Tempe, AZ 85283 480-350-5201 480-350-5050 TDD
www.tempe.gov/pkrec/krc
Advance Registration is Required

